

CLAIMS ONLY						Application Number 18/605245		Filing Date				
						Applicant(s)						
						* May be used for additional claims or amendments						
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/	/	/	/			51					
2		/		/			52					
3		/		/			53					
4		/		/			54					
5		/		/			55					
6		/		/			56					
7		/		/			57					
8		/		/			58					
9		/		/			59					
10		/		/			60					
11		/		/			61					
12		/		/			62					
13		/		/			63					
14		/		/			64					
15		/		/			65					
16		/		/			66					
17		/		/			67					
18		/		/			68					
19		/		/			69					
20		/		/			70					
21		/		/			71					
22		/		/			72					
23							73					
24							74					
25							75					
26							76					
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30							80					
31							81					
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35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	1		3				Total Indep					
Total Depend	25		19				Total Depend					
Total Claims	26		22				Total Claims					